## 2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Турео	r Print Clearly				70 A		
Full Na	me Peter E. Stamnas		Work Address	7 Hazen Drive C	oncord, NH		
Primar	y Occupation Engineer	e-mai	peter.e.stamnas@do	ot.nh.gov	Work Phone	271-1696	
	the office, position, board or commission		of Project Developmen	nt	_	I	
	rs, etc. or employment with state of ment held by you. NO ACRONY		Department of Transportation				
proprie	below the name, address, and type of a stor, or employee, or served in any oth ar year. Sources of retirement benefits oth	er professional or advis	sory capacity, and from which	th any income in exces	s of \$10,000 wa	s derived during the preceding	
1.	Residential Rental Property	•					
2.							
lf you h	nave no qualifying income indicate by wr	iting your initials next to	o the following statement.	My income d	oes not qualify		
report discipl	icate below whether you or a family mer table special interest in an item on this lis line a licensee or permittee, or other decial effect on you or a family member that 1. Any profession, occupation, or bu	t if a change in law, a ch sion by government aff n it would on the gener usiness licensed or certif	nange in administrative rule, a fecting the listed business, pro al public:	decision whether or no ofession, occupation, gro	to award a con	tract, grant a license or permit,	
	profession, occupation, or category of	July 166	The state of the s	Se man star (see Section )		jedi mini ma maninistra	
	2. Health Care 3. Insurance	4. Real Estate, incluagent, developers,		Banking or financial vices	1	e of New Hampshire, county, or pal employment	
	1000000 CONTRACTOR STATE OF THE PARTY OF THE	ent use land ent program	9. Restaurants/	10. Sale and distri beverages	oution of alcoho	lic 11. Practice of law	
	2. Any business regulated by the Public illitles Commission	13. Horse of gambling	or dog racing, or other legal f	14. Educatio		Vater Resources	
	16, Agriculture 17, N.H. taxes:		siness Interest ar erprise Tax		: Specify any ot ecial interest	her area in which you have a	
	read RSA 15-A and hereby swear or affirm who knowingly fails to comply with the						
Date	1/3/2021		Signature of Filer	(1) A			
	Deturn to Office of	Corretem of State 1071	Name Maria Canada Canada II	- D 204 C N	L 02201		

JAN 0 6 2022

NEW HAMPSHIRE
DEPARTMENT OF STATE